

#### DEPARTMENT OF THE AIR FORCE

59TH MEDICAL WING (AETC) LACKLAND AIR FORCE BASE TEXAS

12 FEB 2016

MEMORANDUM FOR SGVU

ATTN: CAPT ANDREW PATTERSON

FROM: 59 MDW/ST/SGVU/CC

SUBJECT: Professional Presentation Approval

- Your paper, entitled <u>Occluded Cigarette Smoke Causing Localized Chloracne-Like Comedones (Podium) Skin Diseases Associated with Agent Orange and Other Organochlorines</u> presented at <u>SURF 2016 San Antonio Military Health System & Universities Research Forum, San Antonio, TX 20 May 2016</u> with MDWI 41-108, and has been assigned local file #16080.
- 2. Pertinent biographic information (name of author(s), title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.
- 3. Please know that the 59th Clinical Research Division cannot pay for reprints ordered from the journal by the authors. In addition, publisher's charges, as well as any charges for color photos, covers for your reprints, or any distinctive specifications, must be coordinated with your department for funding.
- 4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

LINDA STEEL-GOODWIN, Col, USAF, BSC

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Director, Clinical Investigations & Research Support

#### PROCESSING OF PROFESSIONAL MEDICAL RESEARCH PUBLICATIONS/PRESENTATIONS

### Instructions to submit an approval request for PROFESSIONAL MEDICAL RESEARCH PUBLICATIONS/PRESENTATIONS

- Complete page two of 59 MDW Form 3039 (this form).
- 2. Print your name, sign and date the form in the author's signature block or use electronic signature
- 3. Attach a copy of the WHASC IRB or IACUC approval letter for the research related study.
- 4. Attach a copy of your abstract, paper, poster and other supporting documentation.
- 5. Save and forward, via email, the processing form and all supporting documentation to your commander for review/approval.
- 6. On page 2, have your commander:
  - a. Print their name, sign and date the form in the commander's signature block or use electronic signature.
  - b. Contact the 59th CRD/Publications and Presentations Section at (292-7141) for instructions for submitting the request form.
- 7. The 59 CRD/Publications and Presentations Section will route the request form to clinical investigations and public affairs and forward you a final letter of approval or disapproval.
- 8. Once your manuscript, poster or presentation has been approved for public release you may proceed with your publication or presentation submission activities.
- 9. If your manuscript is accepted for scientific publication, please contact the 59th CRD/Publications and Presentations Section (292-7141). This information is reported to the 59 MDW/CC.

NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer:

"The views expressed are those of the [author(s)] [presenter(s)] and do not reflect the official views or policy of the Department of Defense, or its Components."

PROCESSING OF PROFESSIONAL MEDICAL RESEARCH PUBLICATIONS/PRESENTATIONS										
то:	FROM: (Name/Rank	Office Symbo	PROTOCOL NUMBER:							
Clinical Research Division/SGVU (59th CSPG/SGVU)	Andrew Patterso	n/Capt/SGV	/T/MCHE-ME							
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Maranich, Ashley, M. ashley.m.ma	ranich.mil@mail			210-513-4236						
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d. Kaffenberger, Benjamin H.				Ohio State University						
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Patterson, Andrew T. Capt			959CSPS/59MDW/SGVT							
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Keller, Richard A.				San Antonio VA						
i. Elston, Dirk M.				Univ of South Carolina						
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# OCCLUDED CIGARETTE SMOKE EXPOSURE CAUSING LOCALIZED CHLORACNE-LIKE COMEDONES

Capt Andrew T. Patterson, MD<sup>1</sup>, Frances T. Tian, BS<sup>2</sup>, Dirk M. Elston, MD<sup>3</sup>, and Benjamin H. Kaffenberger, MD<sup>4</sup>

<sup>1</sup>San Antonio Military Medical Center, US Air Force/959<sup>th</sup> CSPS; <sup>2</sup>The Ohio State University College of Medicine; <sup>3</sup>Department of Dermatology, Medical University of South Carolina; and <sup>4</sup>Department of Dermatology, The Ohio State University Wexner Medical Center

Many environmental acne disorders including chloracne and oil acne were previously thought to occur predominantly in occupational settings following polycyclic aromatic hydrocarbon exposure. Cigarette smoke has also been shown to contain a large number of these toxic polycyclic aromatic hydrocarbon components and strictly correlates with non-inflammatory acneiform lesion development in post-adolescent patients. We report a case of localized open comedones associated with occluded cigarette smoke exposure near the nasal cavity due to infrequently changed gauze following rhinectomy. Dermal uptake of organochlorines (including dioxins) and other polycyclic aromatic hydrocarbon components in cigarette smoke has the potential to function as a contributing factor in the development chloracne and other acneiform disorders. Dioxins constitutively activate aryl hydrocarbon receptors in the skin and facilitate the preferential differentiation of sebaceous gland progenitor cells into epithelial fates resulting in comedone formation. Several of these environmental and non-inflammatory acne subtypes may share this common molecular propensity for enhanced comedogenesis which likely occurs through the LRIG1-regulated alteration of normal keratinocyte-like developmental pathways via the aryl hydrocarbon receptor signaling cascade. Additional studies are needed to further elucidate the exact mechanistic pathways through which tobacco smoke impacts the integumentary system.

The views expressed herein are those of the authors and do not reflect the official policy or position of San Antonio Military Medical Center, the U.S. Army Medical Department, the U.S. Army Office of the Surgeon General, the Department of the Army, Department of the Air Force, or U.S. Government.

# SKIN DISEASES ASSOCIATED WITH AGENT ORANGE AND OTHER ORGANOCHLORINE EXPOSURES

Capt Andrew T. Patterson, MD<sup>1</sup>, Benjamin H. Kaffenberger, MD<sup>2</sup>, Richard A. Keller, MD<sup>3</sup>, and Dirk M. Elston, MD<sup>4</sup>

<sup>1</sup>San Antonio Military Medical Center, US Air Force/959<sup>th</sup> CSPS; <sup>2</sup>Department of Dermatology, The Ohio State University Wexner Medical Center; <sup>3</sup>Audie L. Murphy Veterans Hospital, San Antonio; and <sup>4</sup>Department of Dermatology, Medical University of South Carolina

Organochlorine exposure is an important cause of cutaneous and systemic toxicity. Exposure has been associated with industrial accidents, intentional poisoning, and the use of defoliants, such as Agent Orange in the Vietnam War. Although longterm health effects are systematically reviewed by the Institute of Medicine, skin diseases are not comprehensively assessed. This represents an important practice gap as patients can present with cutaneous findings. We performed a systematic review of the dermatologic manifestations of known mass organochlorine exposures in military and industrial settings with the goal of providing clinically useful recommendations for dermatologists and other providers seeing patients inquiring about organochlorine effects on the integumentary system. Patients with a new diagnosis of chloracne. porphyria cutanea tarda, cutaneous lymphomas (non-Hodgkin lymphoma), and softtissue sarcomas including dermatofibrosarcoma protuberans and leiomyosarcomas should be screened for a history of Vietnam service or industrial exposure. Inconclusive evidence exists for an increased risk of other skin diseases in Vietnam veterans exposed to Agent Orange including benign fatty tumors, melanomas, non-melanoma skin cancers, milia, eczema, dyschromias, dysthesias, and rashes not-otherwisespecified. Even less support exists for an association with psoriasis, seborrheic dermatitis, neurodermatitis, and hypertrichosis. Affected veterans should be informed of the uncertain data in those cases. Referral to Veterans Affairs for disability assessment in military service members is indicated for conditions classified as having presumed herbicide and Agent Orange associations according to the Veterans Affairs policy.

The views expressed herein are those of the authors and do not reflect the official policy or position of San Antonio Military Medical Center, the U.S. Army Medical Department, the U.S. Army Office of the Surgeon General, the Department of the Army, Department of the Air Force, or U.S. Government.



### DEPARTMENT OF THE AIR FORCE AIR EDUCATION AND TRAINING COMMAND

8 February 2016

## MEMORANDUM FOR SGVT/MCHE-ME ATTN: Capt Andrew Patterson

FROM: 502 ISG/JA

SUBJECT: Ethics Review for Presentation Approval Request

- 1. BLUF: A request for a legal review of a podium presentation titled "Occluded Cigarette Smoke Causing Localized Chloracne-Like Comedones" and a poster presentation titled "Skin diseases associated with Agent Orange and other organochlorines" was submitted by Capt Andrew Patterson. Capt Patterson and his co-authors plan to present this research at the SURF 2016 San Antonio Military Health System & Universities Research Forum in San Antonio, TX, on 20 May 2016. The abstract included the required disclaimer. The disclaimer must also be included on the poster and in the platform presentation. A Public Affairs review will be required if it has not already been obtained. There are no conflicts of interest issues with the poster or platform presentation at this professional society meeting.
- 2. FACTS: An abstract titled "Occluded Cigarette Smoke Causing Localized Chloracne-Like Comedones" was submitted for the poster presentation. An abstract titled "Skin diseases associated with Agent Orange and other organochlorines" was submitted for the podium presentation. The authors plan to present this research at the SURF 2016 San Antonio Military Health System & Universities Research Forum, San Antonio, TX, on 20 May 2016.
- 3. LAWS AND REGULATIONS: DoD 5500.07-R, Joint Ethics Regulation (JER), section 3-307 lays out rules governing "Teaching, Speaking and Writing." If the presentation will "deal in significant part with any ongoing or announced policy, program or operation" of the Air Force, the presenter is required to include a disclaimer that states the "views presented are those of the speaker or author and do not necessarily represent the views of DoD or its Components."
- 4. ANALYSIS: Although the presentations do not "deal in significant part with any ongoing or announced policy, program or operation" of the Air Force, the presenters' affiliation and/or ranks will be included in the abstract, poster, and platform presentations, and the case study information was obtained as part of their military medical practice. The authors included the required disclaimer that the views presented are those of the authors and do not necessarily represent the views of DoD or its Components. Although the disclaimer language included on the abstract is not verbatim from the JER, the language used is appropriate and clearly captures the intent of the language used in the JER. The disclaimer also must be included on the poster and given verbally during the platform presentation. A Public Affairs review will be needed if it

has not already been obtained. There are no apparent conflicts of interest that would prohibit presentation of this research at this professional meeting.

5. CONCLUSION: The abstract presented for review included the disclaimer required by the JER. The disclaimer must be included on the poster and in the platform presentation. If you have any questions, please call Lt Heather Slawson at 671-5728.

Hather M. Slawson, 1Lt, USAF Assistant Staff Judge Advocate

I concur.

Vilench Christilen ARLENE R. CHRISTILLES

Chief, Civil Law